PTO/SB/06 (07-06)

Approved for use through 1/31/2007, OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | | Application or Docket Number 10/648,712 | | | ing Date 26/2003 | To be Mailed |
|--|---|---|---|---|--------------|--|---|--|------------------------|----|-----------------------|------------------------|
| APPLICATION AS FILED – PART I (Column 1) (Column 2) SMALL ENTITY □ OR SMALL ENTITY | | | | | | | | | | | | |
| Н | FOR | N | NUMBER FILED | | NUMBER EXTRA | | | RATE (\$) | FEE (\$) | | RATE (\$) | FEE (\$) |
| | BASIC FEE (37 CFR 1.16(a), (b), | or (c)) | N/A | | N/A | | | N/A | | 1 | N/A | |
| | SEARCH FEE (37 CFR 1.16(k), (i), | or (m)) | N/A | | N/A | | | N/A | | | N/A | |
| | EXAMINATION FE (37 CFR 1.16(a), (p), | | N/A | | N/A | | | N/A | | | N/A | |
| | FAL CLAIMS CFR 1.16(i)) | | minus 20 = | | • | | | x \$ = | | OR | x s = | |
| IND (37 | EPENDENT CLAIM CFR 1.16(h)) | IS | minus 3 = * | | | | | x \$ = | | 1 | x \$ = | |
| | APPLICATION SIZE (37 CFR 1.16(s)) | FEE shee is \$2 addit | If the specification and dra sheets of paper, the applic is \$250 (\$125 for small ent additional 50 sheets or frai 35 U.S.C. 41(a)(1)(G) and | | | n size fee due for each i thereof. See | | | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) | | | | | | | | | | | | |
| * If | the difference in col | umn 1 is less than | r "0" in col | | TOTAL | | 1 | TOTAL | | | | |
| APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY | | | | | | | | | | | | |
| AMENDMENT | 06/30/2008 | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) |
| | Total (37 CFR 1.16()) | · 9 | Minus | ~ 20 | | = 0 | | x \$ = | | OR | X \$50= | 0 |
| | Independent (37 CFR 1.16(h)) | • 3 | Minus | 4 | | = 0 | | x \$ = | | OR | X \$210= | 0 |
| | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | | | | |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | | OR | | |
| | | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | 0 |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) |
| | Total (37 CFR 1,16(i)) | | Minus | | | | | x \$ = | | OR | x s = | |
| | Independent (37 CFR 1,16(h)) | | Minus | ** | | | | x \$ = | | OR | x s = | |
| 핇 | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | |] | | |
| ΑM | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | | OR | | |
| | | | | | | | | | | OR | TOTAL ADD'L FEE | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. I Legal Instrument Examiner." If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". | | | | | | | | | | | | |

has collection of information is origined by 37 CFR 1,10. The information is required to obtain or retain a bound by the public which is in to file used by the USFTO to process) an application. Confidentiality is operand by 38 US 6.C 122 and 37 CFR 1.4. If this collection is estimated to the bet 2 trainities to complete in excluding pathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this borton, should be sent to the Child refinemation Office. U.S. Plants and Triderank Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.